

BEST AVAILABLE COPY

**CLAIMS ONLY**

SERIAL NO.	FILING DATE
APPLICANT(S)	

**CLAIMS**

NO.	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		NO.		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1	/	/	/	/			51		
2	/		/				52		
3	/		/				53		
4							54		
5	/		/				55		
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45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	1		2				TOTAL IND.		
TOTAL DEP.	4		4				TOTAL DEP.		
TOTAL CLAIMS	5	DEP.	6	IND.			TOTAL CLAIMS		

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

FORM PTO-3222 (1-98)

U.S. DEPARTMENT OF COMMERCE  
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